CONTRACTOR	*	ase 2001/03/04 : CIA-RDP81B00879R000900050074-1 CERTIFICATE OF SERVICE									
g			SAC (DMBD)								
Firewe		Offutt AFB, Nebr									
3685 B	radway 5. N.Y.		G4	#. [*]							
CONTRACT		i e e e e	no over a se	DATE OF CERTIFIC	ATE			·			
AF 33(600) HF-AF	1940 EXHIBIT		ne	31 October							
1. NAME OF CTSP	(Last, First, and MI	1	UNIT		3. PER 10	D OF CERTIFI					
4 WACATION TIME (7)			5. SICK TIME (Inclusive dates)		I Oct to THRU 31 Oct 59 6. CONTRACT 7. BILLABLE DA						
4. VACATION TIME (Inclusive dates) FOIAb3a					HOLIDAYS / BILLABLE			LE UA			
None THRU		THRU		U			21				
	THRU		THR		<u> </u>			31	•		
B. DATE TIME AND	1 DOUBLE TIME	DATE	TIME AND 1	ME HOURS WORKED DOUBLE TIME	DATE	TIME AN	5 I Is.		7 2445		
DATE TIME AND	I DOODEE ITME	JAIL I	TIME MAD &	DOUBLE TIME	DATE	TIME AN	DE DE	UBLE	TIME		
None	17						_				
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9. DATES ON WHIC	CH PREMIUM PAY SHIF	TS WERE	WORKED		<u>.t</u>	L:					
XT											
None	THE PROPERTY AND ADDRESS OF THE PARTY OF THE										
DEPARTED RETURNED			DEPARTED RETURNED		date of departure and return, DEPARTED RE) ETURI	NED.		
	NE TORNED	041	ANTED			. FARIED	1 1	LUM	VEU		
**	1 .						-				
None											
11. A	AUTHORIZED TRAVEL P		BY COMMERC		luding Te		3.)				
		ERFORMED OM	BY COMMERC						cos		
11. A			BY COMMERC		luding Te		3.)		cos		
II. A INCLUSIVE DATES Nonehru			BY COMMERC		luding Te		3.)		cos		
II. A INCLUSIVE DATES			BY COMMERC		luding Te		3.)		cos		
11. A INCLUSIVE DATES NON⊕HRU THRU			BY COMMERC		luding Te		3.)		cos		
II. A INCLUSIVE DATES Nonehru	FR	ОМ		IAL CARRIER (Inc	luding Te		MoDi		cos		
11. A INCLUSIVE DATES Non⊕HRU THRU	AUTHORIZED PRIN	ОМ		IAL CARRIER (Inc	luding Te	axicab, etc	MoDi				
11. A INCLUSIVE DATES NOTHRU THRU THRU ILL. INCLUSIVE DATES	AUTHORIZED PRIN	VATELY •		IAL CARRIER (Inc	Iuding Te TO	axicab, etc	MODI				
11. A INCLUSIVE DATES NOTEPHRU THRU THRU 12.	AUTHORIZED PRIN	VATELY •		IAL CARRIER (Inc	Iuding Te TO	axicab, etc	MODI				
11. A INCLUSIVE DATES NOTHRU THRU THRU ILL. INCLUSIVE DATES	AUTHORIZED PRIN	VATELY •		IAL CARRIER (Inc	Iuding Te TO	axicab, etc	MODI		COS		
II. A INCLUSIVE DATES NOTE HRU THRU THRU I2. INCLUSIVE DATES NOTE HRU THRU	AUTHORIZED PRIN	VATELY •		IAL CARRIER (Inc	Iuding Te TO	axicab, etc	MODI				
II. A INCLUSIVE DATES NOTE HRU THRU THRU II. INCLUSIVE DATES	AUTHORIZED PRIN	VATELY •		IAL CARRIER (Inc	Iuding Te TO	axicab, etc	MODI				
II. A INCLUSIVE DATES NONPHRU THRU THRU IZ. INCLUSIVE DATES NONPHRU THRU THRU	AUTHORIZED PRIN	VATELY •		IAL CARRIER (Inc	Iuding Te TO	axicab, etc	MODI				
II. A INCLUSIVE DATES NOTE HRU THRU THRU INCLUSIVE DATES NOTE HRU THRU THRU	AUTHORIZED PRIN	/ATELY -	OWNED CONVE	IAL CARRIER (Inc	Iuding Te TO	axicab, etc	MODI				
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II. A INCLUSIVE DATES NONPHRU THRU THRU I2. INCLUSIVE DATES NONPHRU THRU THRU THRU THRU THRU THRU I3. AUTHORIZED (1)/A	AUTHORIZED PRIV	VATELY - ROM PRIVATEL	OWNED CONVE	VEYANCE: MILES HON REQUESTS USE	Iuding Te TO xcept on-	axicab, etc	MoDi				
II. A INCLUSIVE DATES NONPHRU THRU THRU I2. INCLUSIVE DATES NONPHRU THRU THRU THRU THRU THRU THRU THRU T	AUTHORIZED PRIV	VATELY - ROM PRIVATEL	OWNED CONVE	IAL CARRIER (Inc YANCE TRAVEL (E	Iuding Te TO xcept on-	axicab, etc	MODI				
II. A INCLUSIVE DATES NONPHRU THRU THRU I2. INCLUSIVE DATES NONPHRU THRU THRU THRU THRU THRU THRU I3. AUTHORIZED (1)/A	AUTHORIZED PRIV	VATELY - ROM PRIVATEL	OWNED CONVE	VEYANCE: MILES HON REQUESTS USE	Iuding Te TO xcept on-	axicab, etc	MoDi				
II. A INCLUSIVE DATES NONPHRU THRU THRU I2. INCLUSIVE DATES NONPHRU THRU THRU THRU THRU THRU THRU THRU T	AUTHORIZED PRIV	VATELY - ROM PRIVATEL	OWNED CONVE	VEYANCE: MILES HON REQUESTS USE	Iuding Te TO xcept on-	axicab, etc	MoDi				

					CLOURS ALT	
16. IF THIS IS THE INIT	IAL CERTIFICATE SUBMITT	ED FROM THIS	AF UNIT, STAT	TE PLACE OF LAST AS	BARAMENT AND	0074-4
17. IF THIS IS THE FIR	VAL CERTIFICATE SUBMI	TTED FROM TI	HIS AF UNIT.	STATE DATE OF DI	EPARTURE:	/V / T-
N/A						
18. DEPARTED THE UNIT	ED STATES FOR OVERSEA	S DUTY FROM	(Port)	O	N(Date)	
N/A 19. ARRIVED THE UNITED	STATES FROM OVERSEA	S DUTY AT	(1011)		·(Date)	
N/A			(Port)		N(Date)	
20. NAME OF COUNTRY W	HERE OVERSEAS DUTY WA	S PERFORMED	DURING THIS	PERIOD (Unless pr	ohibited for	security
21. ADDITIONAL INFORM	ATION AND REMARKS:					
N/A						
4 (,)						
22. CERTIFICATION: I c	ertify that the info	rmation in I	tems 1 thru		and correct	to the best
of my knowledge a	nd belief.			FOIAb3a		
	A section of				ature of CTSP	
23. CERTIFICATION: I	certify tha			, the services were authorized	reported above 1 in advance 1	ve were per-
formed in a satisfa authority, and that	appropriate written or	ders have bee	en issued or	requested, with the	following e	ceptions:
· · · · · · · · · ·				•		
,						
·						
		•				
(If services were	not satisfactory, compl	ete written	report has be	en prepared and for	rwarded)	
NAME	STATINTL	GRADE		SICNATURE (Manual s	ióneture is rec	quired)(Facsimile
AFSN	ORGANIZATION	LTCOL				
35808A	4080 SRW(L)			500		
INSTRUCTIONS FOR PRE	PARATION:	***			2	FOIAb3a
	e will be indicated by					ГОІДВОА
	by a certificate will r				1 11 11 11	
c. ITEM 6. The number	of contract holidays	in the period	will be ente	red regardless of	whether they	were work days
If they were work of	lays, this will be show ursement will be made for	n in Item 8 a or holiday wo	s overtime ev ork in accorda	nce with applicabl	e contract.	101 070111110
	r of billable days is the					, sick days,
and contract holide	ays. (Authorized travel	days will be	included in	this item)	•	•
	, 10, 11, 12, and 14, m				ired. If addi	tional space
f. Month and year may	be omitted when entering		cept for date	of certificate and	I Item 3. All	other dates
g. ITEM 23. If servi	period covered by the ces were not satisfactor	ry, or if the	ere is disagr	eement as to the se	ervices perfo	rmed, the AF
	r must explain in Item ved For Release:		4 :.CIA-R□)P81B00879R(000900050	074-1